PTUSSION (08-03)
Approved for use through 7/31/2004. ONB 0031-0032
U.S. Patient and Techniquit Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Ra PATEN	T APPLICATION	FEE DETER	IOITANIMS	N RECORD	TRACTICA CINE	4959	1209	mily A	1
	Subethu	te for Form PTC	<u> 1675 </u>			$ u \gamma$	LXU7	WU_	ł
C	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY					
FOR	MUNISHER ENLED	MADREE	REXTEA.	RATE	FEE		RATE	FEE]
BASIC FEE G7 CFR 1.16(4)					•	OR		٠	1
TOTAL CLAIMS G7 CFR 1.10(4)	minus 20			×4		OR	<u> </u>		
DEPENDENT CLAMAS O7 CFR 1.18(0))	minus 3			× 5		OR	z		
MATPLE DEPENDENT O		7 CFR 1.10(0)			•	OR	+1 .		1
If the difference in column 1 is less than zero, enter "O" in column 2.			TOTAL		OR	TOTAL		1	
			-			,			1
CLAIMS AS AMENDED - PART II						OR.	OTHE	R THAN	1
t26-05 ·	Column 1)	(Column 2)	(Column 3)	SMALL	NTTTY	ex 1		ENTITY	-
	CLAMS EMAINING AFTER	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
Total A	MENDMENT Minus	730	-	25-		OR	×.50-		-
Z TANDANAMI	Minos	- U		- 100			1.200		1=
Σ	HOF WATPLEDEPEND	DITOLOGI DICE	R 1.16(d)	80		OR	260		1
- PRSI PRESCRIAIR				TOTAL		OR.	TOTAL	-/-	1
				ADD'L FEE		JUK	ADD'L FEE		1
<u> </u>	Column 1) CLAIMS	(Column 2)	(Column 3)			1		/	1
	EMANING AFTER MENDMENT	MUMBER PREVIOUSLY PAID FOR	PRESENT	RATE	ADDI- TIONAL FEE		RATE	ADDI- TEDNAL FEE	
Total Control	Minus	mal)- /	X 8a		OR	x se		
TOTAL OF A CONTRACT OF A CONTR	Mirrus		• /	x s =		OR	×8•/	1	
PRET PRESENTATI	ON OF WALTIFLE DEPOND	BIT CLAIM (37 CF	R 1,166()	+=		OR	+, /.		
1111			70.00	TOTAL ADDL FEE			ADOL FEE		┨┈
4112106		Makana M	(Cohena 2)			<i>-</i>	• -		1
	Cohime 1)	(Column 2) NIGHEST	(Column 3)		400	1	RATE	ADDI	1
El l'	REMAINING AFTER MENDMENT	MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL FEE			TIONAL FEE	
Total grans Total		$\tilde{\Lambda}$	•	× 2	ļ	OR	×4	 	4
T independent .	₹	400		- <u> </u>		OP	<u> عسسبادات</u>		. -
FIRST PRESENTATI	OH OF MATERIEDEPEND	ENTOLANA (27CF	As 1" reful) .	+5	•	OR	+3.		
				TOTAL ADDL FEE	ľ	OR	YOTAL ADDL FEE]
If the entry in colur	nn 4 is less than the entr nber Previously Paid For	y ia column 2, will	e 'U' in column	3.	 	•	•		1.

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"If the "Highest Number Proviously Paid For" IN This SPACE is less than 3, enter "3".

The "Highest Number Proviously Paid For" IN This SPACE is less than 3, enter "3".

The "Highest Number Proviously Paid For" IN This SPACE is less than 3, enter "3".

The "Highest Number Proviously Paid For" (Total or Independent) is the highest number found in the appropriate boot in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to exist or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiatry is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and authoriting the completed application form to the USPTO. There will vary depending upon the including costs. Any comments on the amount of time you require to operation this form endor suggestions for reducing the burdent, should be sent to the Chief Information Officer, U.S. Paperts and Tradenant Critics, U.S. Department of Commence, P.O. Box 1650, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissionar for Patents, P.O. Box 1650, Alexandria, VA 22313-1650.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.